Edgar Filing: Snider Brian - Form 4

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| Form 4 | 017 | | | | | | | | | | | |
|---|--------------------------------|--|---------------------------------------|---|---|--------------------|---|--|--|---|--|--|
| August 16, 2 FORM | | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | | OMB APPROVAL OMB 3235-0287 Number: | | |
| Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru 1(b). | 6. Filed Section | | | | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | |
| (Print or Type R | Responses) | | | | | | | | | | | |
| Snider Brian S ₂ | | | Symbol | 2. Issuer Name and Ticker or Trading Symbol Alphatec Holdings, Inc. [ATEC] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Month | | | | Date of Earliest Transaction onth/Day/Year) /15/2017 | | | | Director 10% Owner XOfficer (give title Other (specify below) below) EVP, Strat. Mktg & Prod. Dev. | | | | |
| | | | ndment, Date Original th/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| CARLSBAI | D, CA 92008 | | | | | | | Form filed by M Person | More than One Ro | eporting | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-E | Derivative S | Securi | ties Acc | quired, Disposed o | f, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Y | ear) Execut any | emed ion Date, if ı/Day/Year) | Code (Instr. 8) | 4. Securi on(A) or Di (D) (Instr. 3, | 4 and (A) or | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock | 08/15/2017 | | | Р | 3,000 | А | \$ 1.69 | 78,000 | D | | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | | |
|---|------------|---------------|-------------------------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Snider Brian C/O ALPHATEC SPINE, IN 5818 EL CAMINO REAL CARLSBAD, CA 92008 | C. | | EVP, Strat. Mktg & Prod. Dev. | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Brian R. Snider | 08/16/2017 | | | | | | | | |
| <u>**</u> Signature of | Date | | | | | | | | |

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.